

MAY 12 2008

PATENT
Atty. Docket No. 29997/062

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Moctezuma de la Barrera et al.)
Serial No.: 10/655,922)
Filed: September 5, 2003)
For: SYSTEM AND METHOD OF)
PERFORMING BALL AND SOCKET)
JOINT ARTHROSCOPY)
Group Art Unit: 3735)
Examiner: David Shay)

AMENDMENT TRANSMITTAL and
PETITION FOR EXTENSION OF TIME


Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment with Petition for Extension of Time for the above application.

Certificate of Facsimile Transmission

I hereby certify that this paper is being transmitted herewith via facsimile to the Commissioner for Patents, facsimile number (571) 273-8300, on May 12, 2008.



Thomas P. Riley
Registration No. 50,556
Attorney for Applicants

MAY 12 2008

1. Extension of Time

[X] This is a petition for an extension of time under 37 CFR 1.136 for the total number of months checked below:

| EXTENSION (MONTHS) | | FEE FOR LARGE ENTITY | | FEE FOR SMALL ENTITY |
|--------------------|---|----------------------|--|----------------------|
| One Month | X | \$ 120.00 | | \$ 65.00 |
| Two Months | | \$ 460.00 | | \$ 230.00 |
| Three Months | | \$1,050.00 | | \$ 525.00 |
| Four Months | | \$1,640.00 | | \$ 820.00 |
| Five Months | | \$2,230.00 | | \$1,115.00 |

If an additional Extension of Time is required, please consider this a petition therefor.

Extension Fee Due With This Request \$120.00

3. Fee for Claims

The fee for additional claims [(37 CFR 1.16(b)-(d))] has been calculated as shown below:

| | | | | | SMALL ENTITY | | OTHER THAN A SMALL ENTITY | |
|---|----------------------------------|-------|---------------------------------|---------------|--------------|----------------|---------------------------|----------------|
| | Claims Remaining After Amendment | | Highest No. Previously Paid For | Present Extra | Rate | Additional Fee | Rate | Additional Fee |
| TOTAL | 93 | MINUS | 122 | = 0 | X \$25 = | \$ | X \$50 = | \$ |
| INDEP. | 5 | MINUS | 8 | = 0 | X \$105 = | \$ | X \$210 = | \$ |
| <input type="checkbox"/> First Presentation of Multiple Dependent Claim | | | | | + \$185 = | \$ | + \$370 = | \$ |
| TOTAL ADDITIONAL CLAIM FEE(s) | | | | | | \$ | OR | \$0.00 |

Total Claim fees Due: \$0.00

TOTAL FEES DUE FOR THIS REQUEST: \$120.00

3. Method of Payment of Fees

[X] Attached is PTO-2038 in the amount of: \$120.00

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120.00 0P

4. **Deposit Account and Refund Authorization**

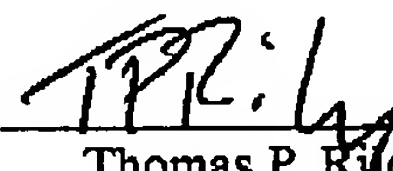
The Commissioner is hereby authorized to charge any deficiency in the amount enclosed or any additional fees which may be required during the pendency of this application under 37 CFR 1.16 or 1.17, except issue fees, to Deposit Account No. 50-1903.

Please refund any overpayment to McCracken & Frank LLP at the address below.

Respectfully submitted,

MCCRACKEN & FRANK LLP

May 12, 2008

By: 
Thomas P. Riley
Reg. No.: 50,556

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